

Our Docket No.: 003543.P002

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Hai Bui

Application No.: 09/316,851

Filed: May 21, 1999

For: Constant Ocular Pressure Active  
Infusion System

Examiner: Michael M. Thompson

Art Group: 3763

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NOV 29 2001

#12  
Amold C  
S. Bryce  
1/4/02AMENDMENT AND RESPONSE TO THE OFFICE ACTIONAssistant Commissioner for Patents  
Washington, DC 20231-9998

Sir:

In response to the outstanding Office Action, mailed September 13, 2001, please  
amend the above-identified Application as follows:

IN THE DRAWINGS

Applicant requests the Examiner's approval of Figure 2 which illustrates the  
accumulator in greater detail. No new substantive matter has been added. A separate letter  
regarding these proposed changes is being sent to the draftsman as set forth in MPEP  
§602.02(r).

IN THE SPECIFICATION

Please amend the Specification as follows:

Please insert the following paragraph on page 5 as the last paragraph:

Figure 2 is an exemplary embodiment of the accumulator of Figure 1.

Please replace the paragraph beginning at page 7, line 9 with the following paragraph:

**BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP**

TELEPHONE: (714) 557-3800

INTELLECTUAL PROPERTY LAW  
3200 PARK CENTER DRIVE  
SUITE 700  
COSTA MESA, CALIFORNIA 92626

FACSIMILE: (714) 557-3347

**FACSIMILE COVER SHEET**Fax Transmission To*Examiner Thompson**USPTO**703-306-4520*Regarding*App. No. 09/316,851; Docket No.  
003543.P002**(31 pages including cover page)*Fax Transmission From*William W. Schaal**11/29/01*

*Attached for filing, please find the Amendment and Response to the Office Action dated September 13, 2001.*

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**If you do not receive all the pages, or if there is any difficulty in receiving, please call (714) 557-3800 and ask for Corinn Reynolds.**

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PTO/88/17 (10-01)

Approved for use through 10/31/2002. OMB 0851-0022  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**FEE TRANSMITTAL**  
**f r FY 2000**

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT (\$)** 0.00**Complete if Known**

Application No.	09/316,851
Filing Date	May 21, 1999
First Named Inventor	Hai Bui
Examiner Name	Michael M. Thompson
Group/Art Unit	3763
Attorney Docket No.	3543P002

**METHOD OF PAYMENT (check one)**

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit  
Account  
Number

02-2666

Deposit  
Account  
Name

Blakely, Sokoloff, Taylor &amp; Zafman LLP

- ☒ Charge Any Additional Fee(s) Required  
Under 37 CFR §§ 1.16, 1.17, 1.19 and 1.20.

- ☒ Applicant claims small entity status.  
See 37 CFR 1.27.

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

**SUBTOTAL (1) (\$)****2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	
30	30	0	9.00 = \$0.00
5	5	0	42.00 = \$0.00

Multiple Dependent

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
103	18	203	9	Claims in excess of 20	
102	84	202	42	Independent claims in excess of 3	
104	280	204	140	Multiple Dependent claim, if not paid	
109	84	209	42	**Reissue independent claims over original patent	
110	18	210	9	**Reissue claims in excess of 20 and over original patent	

**SUBTOTAL (2) (\$)** 0.00

\*or number previously paid, if greater. For Reissues, see below

**FEE CALCULATION (continued)****3. ADDITIONAL FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	480	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,980	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	480	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
189	900	189	900	Request for expedited examination of a design application	

Other fee (specify)

Other fee (specify)

\* Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) (\$)****SUBMITTED BY****Complete (if applicable)**

Name (Print/Type)

William W. Schae

Registration No.  
(Attorney/Agent)

39,018

Telephone

(714) 557-3800

Signature

Date

11/29/01

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2039.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

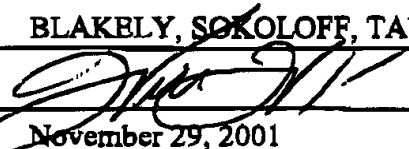
PTO/SB/21 (12/97)


Approved for use through 9/30/2000. OMB 0651-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application No.	09/316,851
		Filing Date	May 21, 1999
		First Named Inventor	Hai Bui
		Group Art Unit	3763
		Examiner Name	Michael M. Thompson
Total Number of Pages in This Submission	28	Attorney Docket Number	3543P002

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition  <input type="checkbox"/> To Convert a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Small Entity Statement  <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Additional Enclosure(s) (please identify below):  <div style="border: 1px solid black; height: 80px; width: 100%;"></div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William W. Schaal, Reg. No. 39,018 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	November 29, 2001

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile under 37 CFR §1.8 on:			
			November 29, 2001
Typed or printed name	Corrinn R. Reynolds		
Signature		Date	November 29, 2001

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NOV 29 2001

Application No. 092019,891 Filing Date: 05/21/99 BSTZ Docket #: 3543P 002 Aty/Soc: WWSite:n  
 Data Mark: 11/29/2001 Docket Due Date: 12/12/2001 Client: Subison

Title: Constant Occlusal Pressure Active Infusion System

Inventor(s) Bui

The following has been received in the U.S. Patent & Trademark Office on the date deemed herein:

- ☒ Amendment: (25 pgs)  
☐ Appeal Brief & two copies ( pgs)  
☐ Application: ( pages w/ cover & abstract)  
☐ Assignment & Cover Sheet ( pgs)  
☒ Certificate of Facsimile  
☐ Continued Prosecution Application (CPA)  
☐ Declaration & POA ( pgs)  
☐ Drawings: sheets, figures  
☐ Express Mail No:   
☐ Extension of Time:   
☒ Fee Transmittal (original & copy)  
☐ Other:   
☐ Information Disclosure Statement & PTO/SB08 ( pgs)  
☐ Issue Fee Transmittal (original & copy)  
☐ Notice of Appeal  
☐ Petition for:   
☐ Request for Continued Examination (RCE)  
☐ Reply Brief ( pgs)  
☐ Request and Certification Under 35 U.S.C. 122(b)(2)(B)(i)  
☐ Request to Reconsider Previous Nonpublication Request  
☐ Response to Notice of Missing Parts & Formalities Letter  
☐ Terminal Disclaimer  
☐ Transmittal of Formal Drawings  
☐ Transmittal of Publication Fee Due  
☒ Transmittal Letter  
☐ Check No. in the Amount of  
☐ Check No. in the Amount of

CM